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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # **S27**3

(8)

1. Corporation Name

MORTGAGE SERVICES GROUP, INC.

Principal Place of Business

Mailing Address

1379 MCANSH SQ. SARASTOA FL 34236 1379 MCANSH SQ SARASTOA FL 34236



| 2. Principal Place of Business 3.29 CENTRAL AV. 3.29 CENTRAL AV. 4. FEI Number NOT APPLICABLE Not Applied For NOT APPLICABLE Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 3. SARASOTA FL 2. City & State 2. City & State 2. City & State 2. Country 2. Country 3. Country 3. Country 4. FEI Number NOT APPLICABLE 5. Certificate of Status Desired Trust Fund Contribution 3. SARASOTA FL 3. This corporation has liability for intangible tax under s 199.032, | US | | US | | | | |
|--|-----------------|---|--|---|--|--|--|
| 25 32.9 CENTRAL AV 26 32.9 CENTRAL AV 50 Solida, Apr #, etc. 50 Solida, Apr #, etc | | | | | | 3a. Date of Last Report 04/24/1995 | |
| Side, Apt. 4, etc. State, Apt. 9, etc. 27 27 27 27 27 27 27 2 | | | 2a. Mailing Address | . 2 | | Applied For | |
| 27 | 21 329 | CENTRAL AY. | 26 329 CEN | ITRAL AV. | NOT APPLICABLE | Not Applicable | |
| Added to Fees STRASOTA FL BS STRASOTA FL COUNTY 20 31 42 3 6 25 0 5 22 3 42 3 6 30 0 5 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Suite, Apt. # | f, etc. | <u> </u> | | 5. Certificate of Status Desired | 1 4 | |
| S. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. OFFICERS AND DIRECTORS 13. Name between the provisions of Sections 607 (502) and 607 (500). Florida Statutes between corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I nearby accept the epiperment as registered agent, I am familiar with, and accept the epiperment as registered agent, I am familiar with, and accept the epiperment as registered agent, I am familiar with, and accept the epiperment as registered agent, I am familiar with, and accept the epiperment as registered agent, I am familiar with, and accept the epiperment as registered agent, I am familiar with, and accept the epiperment as registered agent, I am familiar with, and accept the epiperment as registered agent, I am familiar with, and accept the epiperment as registered agent, I am familiar with, and accept the epiperment as registered agent, I am familiar with and accept the epiperment as registered agent, I am familiar with and accept the epiperment as registered agent, I am familiar with and accept the epiperment as registered agent, I am familiar with and accept the epiperment as registered agent, I am familiar with a registered agent, I am familiar w | City & State | BASOTA FL | | TA FL | | 1 1 | |
| Signaturie Signaturie Sign | Zip | | Zio | Country | 8. This corporation has liability for in | tangible tax under s 199.032, | |
| CLIFTON, CHARLES -1879 MCANSH SQUARE SARASOTA FL 34236 82 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 (5002 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the excitagations of, Section 607.0506, Florida Statutes, SIGNAT URE SIGNAT URE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TOP Replaces Agents special require when the purpose of changing its registered agent. I am state of particular and registere | 24 342 | 36 25 US | 29 <i>34</i> 236 | 30 US | Florida Statutes 🗗 Yes | □No | |
| CLIFTON, CHARLES -1979 MCANSH SQUARE SARASOTA FL 34236 B8 City FL 85 Zip Code 11. Pursuant to the provisions of Socions 607.0502 and 007.1508, Florida Statutes, the above named corporation submits this statement for the pursuance of changing its registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am for the pursuance of changing its registered office or registered agent, or both, in the State of Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. AND DIRECTORS IN 12 13. INTEL DIRECTORS IN 12 14. AND DIRECTORS IN 12 14. AND DIRECTORS IN 12 15. INTEL DIRECTORS IN 12 15. INTEL DIRECTORS 21. INTEL 22. AND DIRECTORS IN 12 14. ACITY ST. ZIP 10. DELETE 3. TITLE 3. TITLE CORRES CUP-ST-ZIP 10. DELETE 3. TITLE CORRES 3. STREET ADDRESS CUP-ST-ZIP 10. DELETE 4. TITLE CORRES CUP-ST-ZIP 10. DELETE 5. TITLE CORRES CUP-ST-ZIP CARD CORRES CUP-ST-ZIP CARD CORRES | | Name and Address of Current | Registered Agent | | 10. Name and Address of New Re | gistered Agent | |
| 13. Pursuant to the provisions of Sections 607.0502 and 507.1508, Florida Statutes. He above provisions of Sections 607.0502 and 507.1508, Florida Statutes. He above provisions of Sections 607.0502 and 507.1508, Florida Statutes. He above provisions of Sections 607.0502 and 507.1508, Florida Statutes. He above provisions of Section 607.0502 and 507.1508, Florida Statutes. SIGNATURE Signature provisions of Section 607.0502, Florida Statutes. | | | | 81 Name | | | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes. 18 | CLIFTON | N. CHARLES | | OO Church Address | /D.O. Roy Number is Not Assessable | | |
| SARASOTA FL 34236 83 64 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes. The above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes. The above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes. The above named corporation submits this statement for the purpose of changing its registered agent. I am registered agent, or both, in the State of Florida Statutes. The above named corporation submits this statement for the purpose of changing its registered agent. I am registered agent. I am registered agent. I am statement for the purpose of changing its registered agent. I am registered agent. I am statement for the purpose of changing its registered agent. I am reg | | • | | Street Addre | | | |
| Sections 607,0502 and 607,1508, Forids Statutes, the above named corporation submite this statement for the purpose of changing its registered office or registered agent, or both, in the State of Floods Schold change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, 1 am registered agent, or both, in the State of Floods Schold change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office framework, and accept the obligations of \$0.000, Flood name of inspitient agent and the registered statutes. 10 | | | | 83 | = 1 CENTIENTE 1 | , , , | |
| 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am registered agent, and accept the obligations of, Section 607.0506, Florida Statutes. SIGNATURE | O/II DIOO | 71A 1 E 04200 | | | | | |
| 11. Presument to the provisions of Sections 607 AGAD and 607 LEGAS. Florida Statutes. The pluses registered of honoging its registered of honoging registered agent. I am make decay the obligations of, Section 607 .0505, Florida Statutes. SIGNATURE Signature, Syred or pinited name of impatient layers and title if asyscalar. POTE Registered Agend supplies to the publications of, Section 607 .0505, Florida Statutes. NOTE Registered Agend supplies to the publications of Agenda Statutes. NOTE Registered Agend supplies registered agent. I am make the publications of Agenda Statutes. SIGNATURE Signature, Syred or pinited name of impatient layers and title if asyscalar. NOTE Registered Agend supplies registered agent. I am make the publication of impatient layers and title if asyscalar. NOTE Registered Agend supplies registered agent. I am make the publication of the public | | | | 84 City | | B5 Zip Code | |
| or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607, OSSOS, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. III.E D CLIFTON, CHARLES 2118 ALAMEDA AVE. SARASOTA FL 14. CITY-ST-2/P SARASOTA FL 14. CITY-ST-2/P SARASOTA FL 22. NWE SIREET ADDRESS CITY-ST-2/P SARASOTA FL 33. SIREET ADDRESS CITY-ST-2/P SARASOTA FL 34. CITY-ST-2/P SARASOTA FL 35. SIREET ADDRESS CITY-ST-2/P SARASOTA FL 36. SIREET ADDRESS CITY-ST-2/P SARASOTA FL 37. TITLE DELETE 38. SIREET ADDRESS CITY-ST-2/P CITY-ST-2/P CITY-ST-2/P CITY-ST-2/P CITY-ST-2/P CITY-ST-2/P CITY-ST-2/ | 11 Durament to | a the provisions of Sections 607 0500 | and CO7 1EO0 Florido Ctatutos | the about passed sevense | tion a document to the state of | 7 - | |
| SIGNATURE Sign | or registere | ed agent, or both, in the State of Florida | Such change was authorized | s the above-named corpora by the corporation's board | d of directors. I hereby accept the appoi | ose or changing its registered οπίσε htment as registered agent. I am | |
| Note | familiar with | h, and accept the obligations of, Sectio | n 607.0505, Florida Statutes. | | ,, | 5 5 | |
| 12. | | | | | | | |
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| certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name | 14 Ldo hereby | certify that the information supplied wi | th this filing is voluntarily furnis | 64 CHY-ST-ZIP | r the examption stated in Section 110.0 | 7/31/k) Florida Statutae I furthor | |
| count most company of disposor of the correction or the recount of the recount of the constant is a constant in the constant i | certify that | the information indicated on this annua | l report or supplemental annua | hed and does not qualify fo | e and that my signature shall have the s | ame legal effect as if made under | |

SIGNATURE: Charles Culture CHARLES CLIFTON 4/17/96 9535885